



CERTIFICATION AGREEMENT

SNOW REMOVAL POLICY 2009-2

Ensuring a safe and secure homeland for all North Dakotans

I hereby certify that all work described in the request for snow removal assistance has been or will be completed according to the North Dakota Department of Emergency Services as described therein and in the time allotted by the State, for completion.

I also certify that records of expenditures will be kept and that all State funds, whether received now or in the future relating to this Project Application, will be spent in accordance with Executive Order 2009-2.

I certify that complete records will be maintained for snow removal cost for a minimum of three years after completion.

All State funds should be audited. A copy of that audit will be sent to NDDDES by the State Auditor.

The State of North Dakota will make every attempt to expedite assistance and simplify and streamline the State Assistance Program.

Applicant: _____
(Please Print)

Applicant Agent Signature

(Date)